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Medical Work in Turkey

Can Conditions in Oriental Countries be Changed?

By

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Constantinople

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MEDICAL WORK IN TURKEY

BY

THOMAS SPEES CARRINGTON, M.D.

I want to bring before you the great importance of the work being done at the present time by American medical men in the Turkish Empire, and so that you may understand clearly the position they fill in that country, let me call your attention to a few of the peculiarities of the state, the people, and their surroundings.

Asia-Minor is divided into a series of plains surrounded by mountain ranges. These plains are cultivated by peasants, and each plain usually supports one large city of from twenty-five to a hundred thousand inhabitants, and from ten to two hundred and fifty villages, where the peasants live together for protection.

The total population of Asia-Minor is about ten millions, and its area is over two hundred and seventy thousand square miles. This vast country is one of the garden spots of the world, and under its mild climate and a system of irrigation which has been in use for hundreds of years the peas-

ants produce fine grains and the choicest fruits.

The traveling is done in wagons, upon ox-carts or on horseback, and patients arriving at our hospitals have often completed a journey of from one to three weeks across these plains and over the mountains in search of surgical assistance. The people are kindly, hospitable, and great lovers of children, and except when aroused and excited by fanatical religious teachers, are obedient to the laws, and peacefully follow their occupations.

The towns and cities are very old, and stand upon sites which have served for this purpose for ages, and as often has been the case, succeeding cities have been built upon the ruins of their predecessors. This custom, while very convenient for the archæologist, has been a great source of danger from a sanitary point of view to the inhabitants. The ground is permeated with filth to a great depth, and the wells are often infected with typhoid or other disease germs.

Where it is possible, the water supply of the town is conducted through earthenware pipes, sometimes many miles across the plains

from mountain streams. This would be ideal, if it were not for the fact that villages are often built over the water courses and the pipes opened for their local supply. The peasants not only use this for drinking, but I have seen them washing their clothes in the pools formed over these openings.

The thoroughfares of all Turkish towns are swarming with dogs. They live the year round without shelter, in the same street in which they were born, and where no doubt their ancestors lived before them for past centuries. There seems to be some unwritten law among them apportioning the different blocks to each band, for if the invisible line between two quarters is overstepped by even one dog, he is considered a trespasser and pitched upon by all near-by animals in the abutting district. His friends then come to his assistance, which starts a general battle often heard over the entire city.

The streets are narrow, crooked and ill-paved with round cobble stones or unpaved and covered deep with mud and standing pools of water. This is due to the open sewers, running down the centers of the thoroughfares, and keeps up the reputa-

tion for odors that Oriental countries have so justly earned.

Ventilation of the houses is unknown, and the cracks surrounding window sashes are stuffed with paper or other material during the winter, while rooms are heated with charcoal braziers. When making professional calls at night, I have often seen ten or fifteen persons sleeping on the floor in one room.

There is no inspection of cattle or milk; health regulations are not carried out, or quarantine imposed for contagious diseases. Cases of smallpox can be seen on the streets and tuberculosis takes its toll from nearly every household.

Physical culture and hygiene are unknown, and the people sleep in the clothing they wear during the day. Meals are prepared at irregular hours and eating from one general dish, with the fingers, is a common custom. Babies are often left lying with faces upturned to the sun and no one thinks to drive the flies away from their little eyelids, while eye diseases are producing blindness in thousands of Turkish children every year. This is, perhaps, the chief reason for this scourge, as the people have no idea that flies carry contagion.

I have often been told by the women that there was no hope of saving a baby if the mother could not nurse it, as the children fed by other methods always die. When babies are old enough to hold things in their hands, green cucumbers are often given them to play with and bite upon. Swaddling clothes are generally used in Turkey and Syria, and while very picturesque, are extremely unhealthy and often produce disease and deformity.

These are a few of the commonest ways in which hygienic laws are broken, and will give an idea of the customs which must be overturned by the doctor if he is to have any great influence upon the health of the nation.

I have called your attention to these rather unpleasant facts for the reason that I want you to see how much wider is the need for educated doctors and nurses, than would at first appear.

I was sent to Turkey in 1897 to build a hospital at Marsovan in Asia-Minor for the mission stationed at that point. During the first year after my arrival, while constructing the new hospital, for temporary use, we rented a native house of five

rooms, furnished it with eight mattresses spread on the floor and a few dishes. An old kitchen table did duty in the operating room, flanked by a number of tin kerosene oil cans which we used as sterilizers. Still, under such conditions, in eight months, ninety major operations were performed.

By the third year, after the hospital had become an established fact, we had room for thirty-two patients, but our beds were always full and many patients often waited weeks for admission. In order to make room, we were obliged to put two children together in one bed, with their heads sticking out from each end. It was at this time I began to wonder what would be the end of such strenuous work, and whether it was worth while. Hundreds were coming to the clinics weekly: we were operating as often as possible, and still were only reaching about one out of every ten of the sufferers who applied to us, while we knew that thousands were dying in nearby towns for lack of the care we were giving to the few.

I was often told that the medical man in foreign lands was ruining his health and throwing away his life in trying to accomplish the impossible;

that in relieving suffering and curing a few of the thousands he was producing only a ripple on a sea of misery, which would die down as soon as he was exhausted. It was thoughts like these that started me planning some method by which we could reach the many and brought out the suggestion of starting a training school for nurses, who in their turn could instruct their own people. However, I soon found that the idea of a native woman performing the duties which fall to a trained nurse was such a radical change from the customs of the country that I despaired of making it a success.

The profession was unknown, except for the three or four foreign nurses who had come into the country with American surgeons. The care of the sick had been for centuries left to servants, and such service was considered menial. For these reasons it seemed impossible to get educated women to take up the work.

This stumbling block, however, was overcome in a providential way through a young woman from a good family whom we had engaged to come to the hospital as interpreter for the English nurses. This girl had a very lovely character, and one day came

to me and said that she would like to become a nurse. I was surprised, as it had been distinctly stipulated that she was not to be asked to help in any way with the manual work of the institution, and I was also afraid that her parents would object. But she was staunch in her resolution and said she would try it for a year.

This was the beginning of the experiment, which, if successful, was to be the opening of a new career for women in Turkey, and might also be the cause of changing the sanitary life of the nation. The girl worked steadily, but every time she went home to see her friends she had a battle to fight. All her family considered that she was disgracing them, and tried in every way, except by using actual force, to prevent her return to the hospital. At the end of her first year, I found that other girls were beginning to be interested in her work. I think it was her pretty uniform and cap that first attracted their attention, for girls are girls even in Turkey. But whether it was this or the love which every woman has for helping those who are suffering, before the end of the second year a number of girls had offered to enter a training class.

After three years of training, graduating exercises were held, and the first young woman was given a diploma. This greatly stimulated the interest in our work, and from that day we had more applications from educated girls who wished to enter the training school than we could accept. My first nurse, after her graduation, was made assistant to the superintendent of the hospital at Marsovan, and she is working there to-day, one of the few native women in the Turkish Empire who stand out above their environment.

Of course, up to the present time very few girls have been trained, but enough has been done to prove that the work will be a success, and that for many years to come the supply of nurses will not equal the demand. Our nurses did good service during a fire which destroyed a third of the city of Marsovan three years ago. Under the direction of their superintendent they stood near the fire line, supplying coffee and food to the workers and dressing the burns and wounds which were brought to them. This proved the worth of our training, for it takes a strong character to do such work in an Oriental crowd,

which in time of danger is very much like a mob.

It was the success of this training school and the many requests received for nurses which made it imperative to enlarge the work, and it seemed wise to place the new school in the capital, as an institution there would be more likely to have a national influence upon sanitary affairs of the entire country. Two years ago we started to carry out this plan, and upon the eve of opening our new hospital and training school it was destroyed by fire with all its contents.

Although this seemed at the time a great disaster, almost without delay we secured a new fireproof building, large enough to accommodate 75 patients and the training school. Here we are now carrying forward the work, and as the training school grows it is our desire to start a system of district nursing, which will gradually bring about hygienic reforms, and do away with that large part of disease and suffering easily prevented by cleanliness and sanitation.

This system we hope to extend in the course of years over a large part of the Turkish Empire. It is now only a dream, but we believe it can

be made to come true. Already many little Turkish children have had their sight saved by simply impressing upon their mothers that flies carry the germs of trachoma. I know of families where formerly one child after another died of tuberculosis who now have healthy children in their homes because they have followed the instruction which has come from our medical department.

No doubt it has entered the minds of some here that I am proposing a herculean task which cannot be performed, and the question will arise, "Can you change the customs of an Oriental nation?" I want to answer this with an emphatic *"Yes,"* for it is being proved day after day in every Turkish town where an American school or hospital is located. If you would visit a large city in Turkey where this work has not begun, you would find many of the young girls from the ages of 12 to 15 married, and staggering under the responsibilities of motherhood, while in the towns where these institutions exist many girls are being educated, with little thought of marriage, before the age of 18 or 20, while some are even allowed a voice in deciding when that event shall take place.

The practice of early marriage is one of the most deeply-rooted customs of Oriental people, and touches the life of the family at its center. If this can be changed, does it not demonstrate that when once these people learn that their habits and mode of living produce disease and death in their children, they will be willing to cast them aside?

Not only families but officials are awakening. Only a few months ago the Governor of a large city spent considerable time with me discussing plans for protecting the water supply in his district from infection, and I could give many instances to prove that a great change is beginning to take place in the hygienic life of the nation.